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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/399,545			ing Date 20/1999	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
	FOR	N	JMBER FII	.ED NUI	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A	1	N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i),		N/A		N/A	1	N/A		1	N/A		
	EXAMINATION FE	E or (a))	N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =			1	X \$ =		OR	x s =		
	EPENDENT CLAIN CFR 1.16(h))	1S	minus 3 =			1	X \$ =		1	X \$ =		
	APPLICATION SIZE 37 CFR 1 16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50	gs exceed 100 on size fee due for each n thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						ı						
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL		
APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)  CIAIMS HIGHEST							SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	02/23/2011	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 17	Minus	55	= 0	1	X \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	· 5	Minus	8	- 0	l	X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.:16(j))								OR			
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	=	1	X \$ =		OR	X \$ =		
	Independent (37 CFR 1.16(h))		Minus	***	-	l	X \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(s))					l						
ΑV	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR	l		
		t a less than "		2	ankana 2		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 1	*I the entry in column 1 is less than the entry in column 2, while "0" in column 3. Legal Instrument Examiner:  **#Bro *#glocal Marked **Proculusly Pat For I' NT HIS SPACE is less than 3, enter "3".  **I' the **Sched Number Proculusly Pat For I' NT HIS SPACE is less than 3, enter "3".  **FIT TO **Proculusly Pat For I' NT HIS SPACE is less than 3, enter "3".  **FIT TO **Proculusly Pat For I' Cital or Incloperacion(s) is the highest number forum in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1,16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to rife codecime of information is equilible; by an overall of the properties of the pr ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.